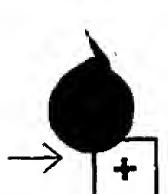


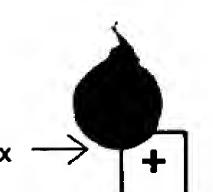
DECLARATION FOR	Attorney	Attorney Docket Number		71111				
UTILITY OR DESIGN	1	ned Inventor	Linda Gail Bernard					
PATENT APPLICATION			COMP	PLETE IF KNOWN				
☐ Declaration ☐ Declaration	Application	Application Number						
Submitted Submitted with Initial OR after Initial	Filing Dat	te	08/02	/2000				
Filing Filing	Group Ar	Group Art Unit						
	Examiner	r Name						
As a below named inventor, I hereby decla	re that:							
My residence, post office address, and citizen		ed below next to	my nam	ie.				
I believe I am the original, first and sole invent	or (if only one n	ame is listed bel	low) or a	an original, first a	nd joint inven	tor (if plural		
names are listed below) of the subject matter	which is claimed	d and for which a	a patent	is sought on the	invention entit	iled:		
POLYAMIDE NANOCOMPOSITE	S WITH OXY	(GEN SCAVI	ENGIN	G CAPABILIT	ΓΥ			
<u> </u>	(Title	of Invention)						
the specification of which is attached hereto								
OR								
was filed on (MM/DD/YYYY)	<u></u>	as U	Inited Sta	ates Application I	Number or PC	T International		
Application Number and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have reviewed and under amended by any amendment specifically refe		nts of the above	identifie	d specification, in	ncluding the c	laims, as		
I acknowledge the duty to disclose information § 1.56.		rial to patentabili	ity as de	fined in Title 37 C	ode of Feder	al Regulations,		
I hereby claim foreign priority benefits under patent or inventor's certificate, or § 365 (a) of the United States of America, listed below an inventor's certificate, or of any PCT international claimed.	f any PCT inter d have also ider	national applicat	tion which checking	ch designated at grant the box, any for	least one cou eign applicati	intry other than on for patent or		
Prior Foreign Application Number(s) Cou	ntry	Foreign Filing (MM/DD/YY	_	Priority Not Claimed	Certified Co	opy Attached? No		
Additional foreign application numbers a	re listed on a su	pplemental prior	ity data	sheet attached he	ereto:			
I hereby claim the benefit under Title 35, Unit				States Provisiona	i Application(s	s) listed below.		
Application Number(s)		(MM/DD/YYYY	<u>) </u>	☐ Additio	nal Provisiona	al application		
60/148,138 08/10/1999				numbers are listed on a				
60/165,064	11/	11/12/1999			supplemental priority data sheet attached hereto.			
								
				}				
		-	. . . 					
	,							
<u> </u>			- <u></u> ,					





DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under Title. 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.										
U.S. Pa	J.S. Parent Application PCT Parent Number Number			Parent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)				
							<u>.</u>			
Additio	nal U.S. or PCT internation	onal appli	ication numb	ers are lis	ted on a	supplemental priority	y data si	neet attac	hed hen	eto.
	d inventor, I hereby app the Patent and Traden			-		er(s) to prosecute t	his appl	ication a	nd to tra	ansact all
	Name		Registra Numb			Name			F	Registration Number
Ro	se M. Allen		35,42			Matthew W. S	mith		 	35,366
:	chael J. Blake		37,09			Cheryl J. Tub				38,346
	etty J. Boshears		33,86			Jonathan D. V			1	39,076
	rry J. Gwinnell		29,00							
	ren A. Harding		33,96							
<u> </u>	onal registered practitione	r(s) name	ed on supple	mental Re	gistered	Practitioner Informa	tion she	et attache	ed hereto)
	orrespondence to:									
Name	Karen A. Harding				, , , , , , , , , , , , , , , , , , , 	 				
Address Eastman Chemical Company										
Address	P.O. Box 511	<u> </u>		· · · · · · · · · · · · · · · · · · ·						
City	Kingsport		State Tennessee ZIP 376						37662	
Country	USA		Telephone	(423)		016	Fax	(423)	229-1	239
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
Name of	Name of Sole or First Inventor A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any]) Family Name or Surname										
	Linda Gail Bernard									
Inventor's Signature Date										
Residence	e: City		State		Cour	ntrv		Citizen	shin	
Residence: City Kingsport Tennessee Country U.S.A. Citizenship U.S.A.					S.A.					
Post Office Address 309 Castaway Drive										
City Kingsport State ZIP Country U.S.A.						Α.				
Additional inventors are being named on the 3 supplemental Inventor(s) sheet(s) attached hereto.										



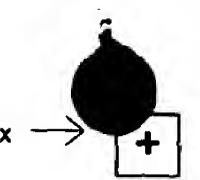


DECLARATION			ADDITIONAL INVENTOR(S) Supplemental Sheet					
Name of Additional Joint Inventor, i	f any:		A petition has been file	ed for this u	nsigned inventor			
Given Name (first and middle	[if any])		Family	y Name or S	Surname			
Horst				Clauber	g			
Inventor's Signature				Date				
Residence: City Kingsport				Country Citiz U.S.A.				
Post Office Address 2601 J B De			·710	Country				
City Kingsport	State Tenness	ee	37660-4786	Country	U.S.A.			
Name of Additional Joint Inventor,	if any:		A petition has been file	ed for this u	insigned inventor			
Given Name (first and middle	[if any])		Family Name or Surname					
Michael John			Cyr					
Inventor's Signature				Date				
Residence: City Kingsport	State Tennessee		untry U.S.A.	Cit	izenship U.S.A.	•		
Post Office Address 204 Coralw	ood Drive							
City Kingsport	State Tenness	ee	ZIP 37663-2712	Country	U.S.A.			
Name of Additional Joint Inventor,	if any:		A petition has been fil	ed for this (unsigned inventor			
Given Name (first and middle	[if any])		Family Name or Surname					
John Walker			Gilmer					
Inventor's Signature				Date				
Residence: City Kingsport	State Tennessee		untry U.S.A.	Cit	tizenship U.S.A.			
Post Office Address 2624 Wildv	vood Drive							
City Kingsport	State			ZIP Country see 37660-4754 U.S.				

	DECLARATIO	
برينكي مساكس كيرسي		_

ADDITIONAL INVENTOR(S) Supplemental Sheet

المراج المرا المراج المراج المرا								
Name of Additional Joint Inventor,	if any:		A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Surname					
James Christoph			Ma	atayabas, .	Jr.			
Inventor's Signature				Date				
Residence: City	State	State Country			ship			
Chandler	Arizon	a	U.S.A.		U.S.A.			
Post Office Address 1380 West	Saragosa	Place						
City Chandler	State Ariz	zona	ZIP 85224-7216	Country	U.S.A.			
Name of Additional Joint Inventor,	if any:		A petition has been file	ed for this unsi	gned inventor			
Given Name (first and middle	e [if any])		Famil	y Name or Sur	name			
Jeffrey Todd				Owens				
Inventor's Signature Residence: City	State	T C	ountry	Date	nship			
Kingsport	Tennes		U.S.A.		U.S.A.			
Post Office Address 117 Willow	brook Drive	 е						
City Kingsport	State Tenn	essee	ZIP 37660-7581	Country	U.S.A.			
Name of Additional Joint Inventor	, if any:		A petition has been filed for this unsigned inventor					
Given Name (first and middl	e [if any])		Family Name or Surname					
Mark Edward			Stewart					
Inventor's Signature				Date				
Residence: City	State	C	ountry	Citize	nship			
Kingsport	Tennes	see	U.S.A.		U.S.A.			
Post Office Address 1104 Dove	r Drive							
ity Kingsport Tennessee			ZIP Country U.S.A.					





DECLARATION			ADDITIONAL INVENTOR(S) Supplemental Sheet					
Nam of Additional J int Inventor, i	f any:		A petition has been filed for this unsigned inventor					
Given Name (first and middle	[íf any])		Fami	ly Nam	e or Surname			
Sam Richard				Tu	rner			
Inventor's Signature		Date						
Residence: City	State		Country		Citizenship			
Kingsport	Tenr	nessee	U.S.A.		U.S.A.			
Post Office Address 1037 Susse	x Drive	<u> </u>						
City Kingsport	State			ZIP Country 37660-5836 U.S.A				
Name of Additional Joint Inventor,	if any:		A petition has been fil	ed for t	his unsigned inventor			
Given Name (first and middle	[if any])		Fami	ly Nam	e or Surname			
Shriram			Bagrodia					
Inventor's Signature Date								
Residence: City Kingsport	State Tenr	nessee	Country U.S.A.		Citizenship U.S.A.			
Post Office Address 2649 Suffoli	k Stree	ŧ						
City Kingsport	State	ennessee	ZIP 37660-5803	Cour	U.S.A.			
Name of Additional Joint Inventor,	if any:		A petition has been filed for this unsigned inventor					
Given Name (first and middle	[if any])		Family Name or Surname					
Inventor's Signature Date								
Residence: City State			Country Citizenship					
Post Office Address								
City	State		ZIP Cou		ountry			